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TITLE: Adapting a Standardized Project to Meet Local Needs: The Supplement to HIV/AIDS (SHAS) Project in Washington State

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ISSUE: HIV/AIDS reports provide limited information about those infected. Data from the supplement to HIV/AIDS Surveillance (SHAS) Project provide enhanced information on important characteristics and needs of the infected population. This information can be used to plan, develop, and monitor HIV prevention interventions.

SETTING: In Washington State, the SHAS Project is a population-based study. Although the project was initially conducted in a limited number of counties, primarily in the Puget Sound area, it has recently been expanded in order to gather more information from infected individuals living in rural areas and, consequently better address local planning needs.

PROJECT: Washington State is one of 12 SHAS sites nationwide where in-depth interviews are conducted with HIV/AIDS patients ≥ 18 years of age on an ongoing basis using a standard questionnaire. Data collected include demographics, socioeconomic status, sexual and drug using behaviors, HIV testing behaviors, therapy for HIV and opportunistic infections, and access and adherence to therapy. Locally, questions of interest to community planning have been added to the standard questionnaire; these include questions about needle exchange, reasons for not testing earlier for HIV, and use of services outside of the county of residence. Individuals with reportable disease are recruited with the assistance of providers and case managers, interviewed in a setting of their choice, and compensated for their time.

RESULTS: A total of 1,335 interviews have been completed since the project started in 1991. SHAS data that have been used recently for community planning groups include: (a) data describing the behaviors of injection drug users with HIV; (b) late diagnosis of HIV infection, particularly in women; (c) reasons for not testing earlier for HIV; and (d) condom use by men who have sex with men. SHAS data have also been included in the 1998 Washington State HIV/AIDS Epidemiologic Profile.

LESSONS LEARNED: Extensive behavioral data that are useful for community planning are scarce particularly in rural areas. In Washington State, adapting the SHAS Project by adding questions of local interest and expanding to a statewide protocol has allowed for collection of data that better meet community planning needs.

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